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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR § 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

Attorney Docket No. 0623 1040001/EKS/PSC

First Inventor Vinson, G. P.

Title Cancer Treatment

Express Mail Label No.

JC803
U.S.
PTO
TO/91/201PTO
10405
1918 U.S. PTO
02/16/01**ADDRESS TO:** Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 25]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
- Oath or Declaration [Total Pages _____]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§ 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76.
- CD-ROM or CD-R in duplicate, large table or Computer Program
(Appendix)
- Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
11. English Translation Document *(if applicable)*
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Two (2) Return Receipt Postcards (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other: Authorization under 37 C.F.R. § 1.136(a)(3) (in duplicate)
 Other: The name of the assignee is: Queen Mary & Westfield College [GB/GB]

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP)
 Prior application information: Examiner n/a of prior application No: PCT/GB99/02727
 Group/Art Unit: n/a

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

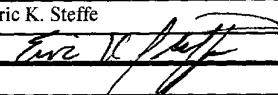
18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 26111 or Correspondence address below

PATENT & TRADEMARK OFFICE

(Insert Customer No. or Attach bar code label here)

| | | | |
|---------|---|----------|--|
| NAME | STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C. | | |
| | Attorneys at Law | | |
| ADDRESS | | | |
| CITY | STATE | ZIP CODE | |
| COUNTRY | TELEPHONE | FAX | |

| | | | |
|-------------------|---|-----------------------------------|--------|
| NAME (Print/Type) | Eric K. Steffe | Registration No. (Attorney/Agent) | 36,688 |
| SIGNATURE |  | | |
| | Date | 2/16/01 | |

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$355.00)

Complete if Known

| | |
|----------------------|----------------------|
| Application Number | (to be assigned) |
| Filing Date | Herewith |
| First Named Inventor | Vinson, G. P. |
| Examiner Name | (to be assigned) |
| Group Art Unit | (to be assigned) |
| Attorney Docket No. | 0623.1040001/EKS/PSC |

| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|----------|---|----------|--|--|--------------------------|--|----------------------------|----------|----------------------------|----------|-----------------|--|----------|-----|-----|-----|----|-------------------------------------|--|--------------------------|-----|----|-----|----|--|--|--------------------------|-----|-----|-----|-----|---------------------------|--|--------------------------|-----|-------|-----|-------|---|--|--------------------------|-----|------|-----|------|--|--|--------------------------|-----|--------|-----|--------|---|--|--------------------------|-----|-----|-----|----|--|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----|-----|-----|-----|--|--|--------------------------|-----|-------|-----|-----|---|--|--------------------------|-----|-------|-----|-----|--|--|--------------------------|-----|-----|-----|-----|------------------|--|--------------------------|-----|-----|-----|-----|--|--|--------------------------|-----|-----|-----|-----|--------------------------|--|--------------------------|-----|-------|-----|-------|---|--|--------------------------|-----|-----|-----|----|----------------------------------|--|--------------------------|-----|-------|-----|-----|------------------------------------|--|--------------------------|-----|-------|-----|-----|--------------------------------|--|--------------------------|-----|-----|-----|-----|------------------|--|--------------------------|-----|-----|-----|-----|-----------------|--|--------------------------|-----|-----|-----|-----|-------------------------------|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----|----|-----|----|--|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----|-----|-----|-----|--|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----|-----|-----|-----|---|--|--------------------------|-----------------------|--|--|--|--|--|--------------------------|-----------------------|--|--|--|--|--|--------------------------|-----------------------------------|--|--|--|--|--|------------------------|
| <p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number <input type="text" value="19-0036"/></p> <p>Deposit Account Name <input type="text" value="Sterne, Kessler, Goldstein & Fox P.L.L.C."/></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> | | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee (\$)</th> <th colspan="2">Fee Description</th> <th>Fee paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td colspan="2">Surcharge - late filing fee or oath</td><td><input type="checkbox"/></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td colspan="2">Surcharge - late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td colspan="2">Non-English specification</td><td><input type="checkbox"/></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td colspan="2">For filing a request for ex parte reexamination</td><td><input type="checkbox"/></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td colspan="2">Requesting publication of SIR prior to Examiner action</td><td><input type="checkbox"/></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td colspan="2">Requesting publication of SIR after Examiner action</td><td><input type="checkbox"/></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td colspan="2">Extension for reply within first month</td><td><input type="checkbox"/></td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td colspan="2">Extension for reply within second month</td><td><input type="checkbox"/></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td colspan="2">Extension for reply within third month</td><td><input type="checkbox"/></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695</td><td colspan="2">Extension for reply within fourth month</td><td><input type="checkbox"/></td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945</td><td colspan="2">Extension for reply within fifth month</td><td><input type="checkbox"/></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td colspan="2">Notice of Appeal</td><td><input type="checkbox"/></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td colspan="2">Filing a brief in support of an appeal</td><td><input type="checkbox"/></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td colspan="2">Request for oral hearing</td><td><input type="checkbox"/></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td colspan="2">Petition to institute a public use proceeding</td><td><input type="checkbox"/></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td colspan="2">Petition to revive - unavoidable</td><td><input type="checkbox"/></td></tr> <tr><td>141</td><td>1,240</td><td>241</td><td>620</td><td colspan="2">Petition to revive - unintentional</td><td><input type="checkbox"/></td></tr> <tr><td>142</td><td>1,240</td><td>242</td><td>620</td><td colspan="2">Utility issue fee (or reissue)</td><td><input type="checkbox"/></td></tr> <tr><td>143</td><td>440</td><td>243</td><td>220</td><td colspan="2">Design issue fee</td><td><input type="checkbox"/></td></tr> <tr><td>144</td><td>600</td><td>244</td><td>300</td><td colspan="2">Plant issue fee</td><td><input type="checkbox"/></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td colspan="2">Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr> <tr><td>123</td><td>130</td><td>123</td><td>130</td><td colspan="2">Petitions related to provisional applications</td><td><input type="checkbox"/></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td colspan="2">Submission of Information Disclosure Stmt</td><td><input type="checkbox"/></td></tr> <tr><td>581</td><td>40</td><td>481</td><td>40</td><td colspan="2">Recording each patent assignment per property (times number of properties)</td><td><input type="checkbox"/></td></tr> <tr><td>146</td><td>710</td><td>246</td><td>355</td><td colspan="2">Filing a submission after final rejection (37 CFR 1.129(a))</td><td><input type="checkbox"/></td></tr> <tr><td>149</td><td>710</td><td>249</td><td>355</td><td colspan="2">For each additional invention to be examined (37 CFR 1.129(b))</td><td><input type="checkbox"/></td></tr> <tr><td>179</td><td>710</td><td>279</td><td>355</td><td colspan="2">Request for Continued Examination (RCE)</td><td><input type="checkbox"/></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td colspan="2">Request for expedited examination of a design application</td><td><input type="checkbox"/></td></tr> <tr> <td colspan="6">Other fee (specify) :</td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="6">Other fee (specify) :</td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="6">*Reduced by Basic Filing Fee Paid</td> <td>SUBTOTAL (3) (\$ 0.00)</td> </tr> </tbody> </table> | | | | | | Large Entity Fee Code (\$) | Fee (\$) | Small Entity Fee Code (\$) | Fee (\$) | Fee Description | | Fee paid | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | | <input type="checkbox"/> | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | | <input type="checkbox"/> | 139 | 130 | 139 | 130 | Non-English specification | | <input type="checkbox"/> | 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | | <input type="checkbox"/> | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | | <input type="checkbox"/> | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | | <input type="checkbox"/> | 115 | 110 | 215 | 55 | Extension for reply within first month | | <input type="checkbox"/> | 116 | 390 | 216 | 195 | Extension for reply within second month | | <input type="checkbox"/> | 117 | 890 | 217 | 445 | Extension for reply within third month | | <input type="checkbox"/> | 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | | <input type="checkbox"/> | 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | | <input type="checkbox"/> | 119 | 310 | 219 | 155 | Notice of Appeal | | <input type="checkbox"/> | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | | <input type="checkbox"/> | 121 | 270 | 221 | 135 | Request for oral hearing | | <input type="checkbox"/> | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | | <input type="checkbox"/> | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | | <input type="checkbox"/> | 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | | <input type="checkbox"/> | 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | | <input type="checkbox"/> | 143 | 440 | 243 | 220 | Design issue fee | | <input type="checkbox"/> | 144 | 600 | 244 | 300 | Plant issue fee | | <input type="checkbox"/> | 122 | 130 | 122 | 130 | Petitions to the Commissioner | | <input type="checkbox"/> | 123 | 130 | 123 | 130 | Petitions related to provisional applications | | <input type="checkbox"/> | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | | <input type="checkbox"/> | 581 | 40 | 481 | 40 | Recording each patent assignment per property (times number of properties) | | <input type="checkbox"/> | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR 1.129(a)) | | <input type="checkbox"/> | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR 1.129(b)) | | <input type="checkbox"/> | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | | <input type="checkbox"/> | 169 | 900 | 169 | 900 | Request for expedited examination of a design application | | <input type="checkbox"/> | Other fee (specify) : | | | | | | <input type="checkbox"/> | Other fee (specify) : | | | | | | <input type="checkbox"/> | *Reduced by Basic Filing Fee Paid | | | | | | SUBTOTAL (3) (\$ 0.00) |
| Large Entity Fee Code (\$) | Fee (\$) | Small Entity Fee Code (\$) | Fee (\$) | Fee Description | | Fee paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 139 | 130 | 139 | 130 | Non-English specification | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116 | 390 | 216 | 195 | Extension for reply within second month | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 117 | 890 | 217 | 445 | Extension for reply within third month | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 119 | 310 | 219 | 155 | Notice of Appeal | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 121 | 270 | 221 | 135 | Request for oral hearing | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 143 | 440 | 243 | 220 | Design issue fee | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 144 | 600 | 244 | 300 | Plant issue fee | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 123 | 130 | 123 | 130 | Petitions related to provisional applications | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 581 | 40 | 481 | 40 | Recording each patent assignment per property (times number of properties) | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR 1.129(a)) | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR 1.129(b)) | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) : | | | | | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) : | | | | | | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Reduced by Basic Filing Fee Paid | | | | | | SUBTOTAL (3) (\$ 0.00) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>** or number previously paid, if greater. For Reissues, see above</p> <p>SUBTOTAL (1) (\$ 355.00)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>SUBTOTAL (2) (\$ 0.00 (will pay fee later)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

** or number previously paid, if greater. For Reissues, see above

SUBTOTAL (3) (\$ 0.00)

SUBMITTED BY

| Name (Print/Type) | Eric K. Steffe | Registration No. (Attorney/Agent) | 36,688 | Telephone | 202-371-2600 |
|-------------------|---|--------------------------------------|--------|-----------|--------------|
| Signature |  | | | Date | 2/16/01 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

ATTORNEYS AT LAW

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02/16/01

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*BAR OTHER THAN D.C.
**REGISTERED PATENT AGENT
***SENIOR COUNSEL

February 16, 2001

WRITER'S DIRECT NUMBER:
(202) 371-2625
INTERNET ADDRESS:
ESTEFFE@SKGF.COM

Commissioner for Patents
Washington, D.C. 20231

Box Patent Application

Re: U.S. Non-Provisional Utility Patent Application under 37 C.F.R. § 1.53(b)
Appl. No. (to be assigned); Filed: Herewith
(Continuation of PCT/GB99/02727, Int'l Filing Date: August 18, 1999)
For: **Cancer Treatment**
Inventors: Vinson *et al.*
Our Ref: 0623.1040001/EKS/PSC

Sir:

The following documents are forwarded herewith for appropriate action by the U.S.
Patent and Trademark Office:

1. USPTO Utility Patent Application Transmittal Form PTO/SB/05;
2. U.S. Utility Patent Application entitled:

Cancer Treatment

and naming as inventors:

Gavin Paul VINSON
John Richard PUDDEFOOT
Miles Gordon BERRY

the application comprising:

- a. specification containing:

Commissioner for Patents
February 16, 2001
Page 2

- i. 24 pages of description prior to the claims;
- ii. 1 pages of claims (8 claims);
- iii. a one (1) page abstract;

- b. Three (3) sheets of drawings: (Figures 1-3); and
- c. an Application Data Sheet (37 C.F.R. § 1.76).

- 3. Authorization to Treat a Reply As Incorporating An Extension of Time Under 37 C.F.R. § 1.136(a)(3) (*in duplicate*);
- 4. Fee Transmittal Form (PTO-SB-17) (*in duplicate*);
- 5. Our check no. **30414** in the amount of **\$355.00** to cover the basic filing fee; and
- 6. Two (2) return postcards.

The name of the assignee is Queen Mary & Westfield College [GB/GB].

Correspondence should be sent to Customer Number 26111.

It is respectfully requested that, of the two attached postcards, one be stamped with the filing date of these documents and returned to our courier, and the other, prepaid postcard, be stamped with the filing date and unofficial application number and returned as soon as possible.

This patent application is being submitted under 37 C.F.R. § 1.53(b) without a Declaration.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.



Eric K. Steffe
Attorney for Applicants
Registration No. 36,688

EKS/PSC:amm
Enclosures

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Vinson *et al.*

Appl. No. (to be assigned)
(Continuation of PCT/GB99/02727)

Filed: Herewith
(Int'l Filing Date: August 18, 1999)

For: **Cancer Treatment**

Art Unit: (to be assigned)

Examiner: (to be assigned)

Atty. Docket: 0623.1040001/EKS/PSC

**Authorization To Treat A Reply As Incorporating An Extension Of Time
Under 37 C.F.R. § 1.136(a)(3)**

Commissioner for Patents
Washington, D.C. 20231

Sir:

The U.S. Patent and Trademark Office is hereby authorized to treat any concurrent or future reply that requires a petition for an extension of time under this paragraph for its timely submission, as incorporating a petition for extension of time for the appropriate length of time. The U.S. Patent and Trademark Office is hereby authorized to charge all required extension of time fees to our Deposit Account No. 19-0036, if such fees are not otherwise provided for in such reply. A duplicate copy of this authorization is enclosed.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

Eric K. Steffe
Attorney for Applicants
Registration No. 36,688

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